# Division of MH/DD/SA Services Consumer Data Warehouse (CDW) LOCAL MANAGEMENT ENTITIES (LME) Reporting Requirements October 1, 2008, Version 1.11

# Overview

In July 1999, the Division of Mental Health/Developmental Disabilities/Substance Abuse Services (MH/DD/SAS) replaced the old Client Information System with a modern Consumer Data Warehouse (CDW). The CDW is the data repository for demographic, clinical, outcomes and satisfaction data about clients served by MH/DD/SAS. The data stored in the CDW is the primary source of information for Mental Health Block Grant (MHBG) and Substance Abuse Block Grant (SABG) reporting as well as Legislative requests. Additionally, the CDW provides a rich source of information for planning and evaluation of the MH/DD/SAS Services provided to the citizens of North Carolina.

In an effort to reduce data redundancy and to improve reporting capabilities the CDW is undergoing substantial changes in the area of data integration. In addition to the data submitted to the CDW by the LME's, data extracts taken from secondary data sources such as IPRS, NC-TOPPS, and Consumer Satisfaction Surveys are now being integrated and stored in the CDW. The integration of these new data sources is possible through the utilization of the Department of Health and Human Services (DHHS) Common Name Data Service (CNDS).

This document contains the Reporting File Formats with associated data dictionary names and data value edits.

# Summary of Key Characteristics of the CDW

- All data must be reported electronically; no paper forms are accepted
- Records with fatal errors (see File Format section below) will be returned to the LME electronically and must be resubmitted electronically.
- Data may be submitted daily, weekly, or monthly
- Data is expected to be updated periodically; it must be sent more frequently than on admission (see below for expected schedules)
- Files must be sent in standard Electronic Data Interchange (EDI) format a single file with multiple record types, and should be ordered in the same sequence in which it was transacted.
- Data fields may be Mandatory, Required, or Optional
- "Data Dumps" are available upon request

#### File Formats

#### **Data Element Edits**

- 1. If a field is MANDATORY in the Reporting Requirements and a blank or invalid value is sent, the record will be rejected and returned to the LME electronically. The LME must then correct it and resubmit it electronically.
- 2. If a field is REQUIRED in the Reporting Requirements, the Division expects to receive it with the record. The record will be accepted without it, however, periodic reports will be issued to indicate which of these data elements is missing or incorrect and must be fixed.
- 3. If a field is OPTIONAL in the Reporting Requirements, the record will be accepted without it and periodic reports will not be issued to indicate which of these data elements is missing. This field was included to conform with the recommendations of the Mental Health Statistical Improvement Program (MHSIP); it could be required in the future.
- 4. It is required that all alphanumeric fields be left-justified and padded with spaces to the right. It is required that numeric or integer fields be right-justified with leading zeroes.
- 5. All dates must be in the format yyyymmdd year, month, day
- 6. Duplicate records: If an ADD record of any type is received with an LME number, client number, and applicable date e.g. admit date, discharge date, diagnosis effective date matching a record already in the database, the record received will be rejected as a duplicate and returned to the LME.
- 7. Client number = Case number
- 8. The Data Dictionary enclosed with this document provides detailed information about each data element. The data element will be listed under the 'Data Dictionary Data Code' as described in the tables. This dictionary is for reference only; please use information in the reporting requirements if there is an apparent discrepancy between the dictionary and the requirements.

#### File Structure

- 1. A minimum of one file from each LME for each month is expected, however files can be sent on a daily basis.
- 2. Different types of records within the file have different lengths but, unless otherwise indicated, the record length is fixed for a given record type. However, filler at the end of each record is not required.
- 3. All records should be separated by a carriage return (HEX 0D). This is an inherent byproduct of the WS\_FTP software product and does not need to be programmed into the file if WS\_FTP is used. For other FTP software, check manufacturer's specifications.
- 4. The records should be sequenced by client number i.e. all record types for one client should be together, and in the same order in which the transactions occurred.

5. An end of file marker must be present at the end of the file, after the Trailer Record. (HEX 1C). This is an inherent byproduct of the WS\_FTP software product and does not need to be programmed into the file if WS\_FTP is used. For other FTP software, check manufacturer's specifications.

> Header Record - Mandatory Various records (record type 10 through 88) Trailer Record - Mandatory

- 6. All records updated or added in a month must be included in the monthly file; not just the latest ones for a consumer i.e. selection should be on last update date.
- 7. It is preferred that only those records that change are sent; however it is acceptable to send update records with no modified elements.

There are 12 possible records for transmission. These are:

Record Name	Record No.	Transmit Frequency
Header Record	00	Beg of file-Mandatory
Identifying Information	10, 30	Daily-Monthly
Screening Information	71,72,73	Daily-Monthly
Demographics	11, 31, 81	Daily-Monthly
Consumer Episode Completion (Discharge) Details	12, 32, 82	Daily-Monthly
Diagnosis Details	13, 33, 83	Daily-Monthly
Disability Details	14, 34, 84	Daily-Monthly
Special Population Details	15, 35, 85	Daily-Monthly
Risk Factor Details	16, 36, 86	Daily-Monthly
Substance Abuse Details	17, 37, 87	Daily-Monthly
<b>Substance Abuse Treatment (Movement) Details</b>	18, 38, 88	Daily-Monthly
Trailer Record	99	End of file-Mandatory

<sup>1</sup>n = Add new record

6/12/2008

<sup>3</sup>n = Update existing record

<sup>8</sup>n = Delete erroneously sent record; all fields on this record MUST match those on record being deleted or the delete record will be rejected.

Name Header Record Format

**Description** This record provides identifying information including the process date and the data source (LME).

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**Frequency** First record of each file

**Record Size** 15 Bytes

Rules Mandatory in all files as first record

Sendne record:

• in each file

• the LME/process date combination must be unique. If the same file is sent more than once i.e. with the same LME/process date combination, the entire file will be rejected.

#	Data Name	Format	Data Dictionary	Mandatory /Optional	Position	Valid Values/Remarks
			Data Code			
1.	Record Type	Char(2)		Mandatory	1-2	'00': Header
2.	LME	Char(5)	cons_area_pgm_fac + area_pgm_code	Mandatory	3-7	
3.	Process Date	Char(8)		Mandatory	8-15	YYYYMMDD - Date file is created

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Name Trailer Record Format

**Description** This record provides identifying information including the LME, the process date and number of records being transmitted

**Frequency** Last record of each file

**Record Size** 25 Bytes

Rules Mandatory in all files as last record

Send one record:

• in each file

#	Data Name	Format	Data Dictionary Data Code	Mandatory /Optional	Position	Valid Values
1	Record Type	Char(2)		Mandatory	1-2	'99' : Trailer
2	LME	` '	cons area nam fee l	-	3-7	)) . Hunci
۷.	LIVIE	Char(5)	cons_area_pgm_fac + area_pgm_code	Mandatory	3-7	
3.	Process Date	Char(8)		Mandatory	8-15	YYYYMMDD - Date file is created
4.	Total Number of Records	Num(10)		Mandatory	16-25	999999999 - including header and trailer
						record

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# Name Identifying Information

**Description** This record provides identifying information about consumers. This data will be used to:

• ensure that data received from different sources about the same consumer is associated with the same consumer in the warehouse and

facilitate sharing data with other state systems as necessary for statistical analysis and planning.

This data will be stored in an encrypted format and will not be available on any reports or queries.

**Frequency** Daily

**Record Size** 130 Bytes

**Rules** Mandatory for all new consumers (clients).

Send a record:

• for each new consumer

• when a new identifier is collected or

• the existing identifier information is modified

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**Notes** 1. This record can be sent in one of two alternate formats

2. All of the different identifiers are described in the Data Dictionary under the data element 'Identifier'.

#### Format 1

#	Data Name	Format	Data Dictionary Data Code	Key	Mandatory	Position	Valid Values
				Field	/Optional		
1.	Record Type	Char(2)			Mandatory	1-2	'10': Add
							'30' : Update
2.	Identifier Type 01	Char(1)	identifier_type	Yes	Mandatory	3	'A' : LME
3.	LME	Char(5)	cons_area_pgm_fac + area_pgm_code	Yes	Mandatory	4-8	
4.	Client Number	Char(10)	cons_id_identifier	Yes	Mandatory	9-18	LME Client Record Number - Case
							Number
5.	Identifier Type 02	Char(1)	identifier_type		Mandatory	19	'U' : Unique Identifier

	XX	CI (15)	1111	3.6 1.	20.24	TY 11 . D) 07
6.	Unique Identifier	Char(15)	cons_id_identifier	Mandatory	20-34	Used by most DMH systems -
						consists of first three characters of
						last (maiden) name, first character of
						first name, six character birth date,
						and an identifier if more than one
						consumer with same id
7.	Identifier Type 03	Char(1)	identifier_type	Optional	35	'S': SSN
						Blank
8.	SSN	Char(15)	cons_id_identifier	Mandatory	36-50	Nine digit numeric
				if the		Encrypted
				previous		
				field = 'S'		
9.	Identifier Type 04	Char(1)	identifier_type	Optional	51	'D': Driver License
						Blank
10.	Driver License	Char(15)	cons_id_identifier	Mandatory	52-66	Non Blank
				if the		
				Previous		
				field = 'D'		
11.	Identifier Type 05	Char(1)	identifier_type	Optional	67	'M' : Medicaid
						Blank
12.	Medicaid Number	Char(15)	cons_id_identifier	Mandatory	68-82	Non Blank
				if the		Encrypted
				previous		
				field = 'M'		
13.	Identifier Type 06	Char(1)	identifier_type	Optional	83-83	'R': Medicare
						Blank
14.	Medicare Number	Char(15)	cons_id_identifier	Mandatory	84-98	Non Blank
				if the		Encrypted
				previous		
				field = 'R'		
15.	Identifier Type 07	Char(1)	identifier_type	Future	99	
16.	Identifier	Char(15)	cons_id_identifier	Future	100-114	
17.	Identifier Type 08	Char(1)	identifier_type	Future	115	
18.	Identifier	Char(15)	cons_id_identifier	Future	116-130	

# **Identifying Information: Format 2**

#	Data Name	Format	Data Dictionary Data Code	Key Field	Mandatory /Optional	Position	Valid Values
1.	Record Type	Char(2)			Mandatory	1-2	'10' : Add '30' : Update
2.	Identifier Type 01	Char(1)	identifier_type	Yes	Mandatory	3	'A' : LME
3.	LME	Char(5)	cons_area_pgm_fac + area_pgm_code	Yes	Mandatory	4-8	
4.	Client Number	Char(10)	cons_id_identifier	Yes	Mandatory	9-18	LME Client Record Number - Case Number
5.	Identifier Type 02	Char(1)	identifier_type		Mandatory	19	'U' : Unique Identifier
6.	Unique Identifier	Char(15)	cons_id_identifier		Mandatory	20-34	Used by most DMH systems - consists of first three characters of last (maiden) name, first character of first name, six character birth date, and an identifier if more than one consumer with same id
7.	Identifier Type	Char(1)	identifier_type		Optional	35	Valid Values 'U', 'S', 'D', 'M' and 'R'
8.	Identifier	Char(15)	cons_id_identifier		Mandatory if the previous field is non blank	36-50	This field should contain the value base on the contents of the previous filed. If the previous field is:  'S': Encrypted Social Security Number 'D': Drivers License Number 'M': Encrypted Medicaid Number 'R': Encrypted Medicare Number

Note: Fields 7,8 can occur 4 times to send a variety of identifiers in one record.

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Name Screening

**Description** This record provides screening, triage and descriptive information about consumers.

**Frequency** Daily;

**Record Size** 108 Bytes

**Rules** Mandatory for all persons requesting a new episode of care

Send a record:

• When a screening has occurred and the client is not already being served by the LME or Contract Provider

#	Data Name	Format	Data Dictionary	Key	Mandatory	Position	Valid Values/Remarks
			Data Code	Field	/Optional		
1.	Record Type	Char(2)			Mandatory	1-2	'71' : Add '72' : Update
							'73' : Delete
2.	LME	Char(5)	cons_area_pgm_fac + area_pgm_code	Yes	Mandatory	3-7	
3.	Client Number	Char(10)	cons_id_identifier	Yes	Mandatory	8-17	Case Number
4.	Screening Date	Char(8)	cons_scr_date	Yes	Mandatory	18-25	YYYYMMDD
5.	Access/Triage Timeline	Char(1)	access_timeline		Mandatory	26	E=Emergent, R=Routine, N=Non Threshold, U=Urgent
6.	Where Referred After Triage	Char(1)	where_ref_after_triag		Mandatory	27	E=Enhanced, B=Basic Benefit, C=Community Resources, R=Crisis
7.	Screening Time Begin	Char (4)	screen_time_begin		Mandatory	28-31	ННММ
8.	Screening Time End	Char (4)	screen_time_end		Mandatory	32-35	HHMM
9.	Screening Method	Char (1)	screen_method		Mandatory	36	F=Face to Face, T=Telephonic
10.	County of Residence	Char (3)	screen_county_resid		Mandatory	37-39	
11.	Currently Enrolled In Medicaid	Char (1)	screen_medicaid_enrollment		Mandatory	40	N=No, Y=Yes
12.	Presenting Age/Disability Problem 1	Char (2)	screen_pres_agedis_prob1		Mandatory	41-42	AM=Adult Mental Health CM=Child Mental Health AD=Adult Developmental Disability CD=Child Developmental Disability AS=Adult Substance Abuse CS=Child Substance Abuse

#	Data Name	Format	Data Dictionary Data Code	Key Field	Mandatory/ Optional	Positio n	Valid Values/Remarks
13.	Presenting Age/Disability Problem 2	Char (2)	screen_pres_agedis_prob2		Mandatory if applicable	43-44	AM=Adult Mental Health CM=Child Mental Health AD=Adult Developmental Disability CD=Child Developmental Disability AS=Adult Substance Abuse CS=Child Substance Abuse
14.	Presenting Age/Disability Problem 3	Char (2)	screen_pres_agedis_prob3		Mandatory if applicable	45-46	AM=Adult Mental Health CM=Child Mental Health AD=Adult Developmental Disability CD=Child Developmental Disability AS=Adult Substance Abuse CS=Child Substance Abuse
15.	Appointment Date	Char (8)	appoint_date		Mandatory if data item 6 is E, R, S	47-54	YYYYMMDD
16.	Appointment Time	Char (4)	appoint_time		Mandatory if data item 6 is E, R, S	55-58	ННММ
17.	How Provider Chosen	Char (1)	prov_chos_how		Mandatory	59	1-4
18.	Why Provider Chosen	Char (2)	prov_chos_why		Mandatory	60-61	01-09
19.	Accommodation of Special Consumer Needs	Char (2)	accom_for_handi		Mandatory	62-63	01-99
20.	Active Military, Reserve, National Guard Status	Char (1)	active_military_status		Mandatory	64	1-3
21.	3 1	Char (1)	active_military_operation		Mandatory	65	1-4
22.	Proficient in English	Char (1)	english-proficiency		Mandatory	66	N=No Y=Yes
23.	Primary Language	Char (1)	primary_language		Mandatory	67	E,L,F,S,O,N
24.	Filler	Char (41)			Optional	68-108	Spaces

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Name Demographics

**Description** This record provides admission and descriptive information about consumers.

**Frequency** Daily

**Record Size** 108 Bytes

Rules Mandatory for all new consumers (clients) who are receiving Crisis Services or are a presumed member of a target population

Send a record:

• for each new consumer (episode of care)

• when new data is collected

• when the existing demographic information is modified

• when an admission is deleted

#	Data Name	Format	Data Dictionary	Key	Mandatory	Position	Valid Values/Remarks
			Data Code	Field	/Optional		
25.	Record Type	Char(2)			Mandatory	1-2	'11' : Add
							'31': Update
							'81' : Delete
	LME	Char(5)	cons_area_pgm_fac + area_pgm_code	Yes	Mandatory	3-7	
27.	Client Number	Char(10)	cons_id_identifier	Yes	Mandatory	8-17	Case Number
28.	Admission Date	Char(8)	cons_adm_date	Yes	Mandatory	18-25	YYYYMMDD
29.	County of Residence	Char(3)	cons_county_reside; county_code		Mandatory	26-28	
30.	Date of Birth	Char(8)	cons_date_of_birth		Mandatory	29-36	Mandatory for Add and Update
31.	Ethnicity	Char(2)	ethnicity		Mandatory	37-38	
32.	Marital Status	Char(1)	marital_status		Mandatory	39	
33.	Race	Char(1)	race		Mandatory	40	
34.	Gender	Char(1)	gender		Mandatory	41	
35.	State of Residence	Char(2)	state_of_residence		Optional	42-43	
36.	Ability to Pay	Char(1)	ability_to_pay		Optional	44	"U"=unknown
37.	Commitment Status	Char(3)	commit_status_ap		Optional	45-47	
38.	Competency Status	Char(1)	competency_status		Optional	48	

**Data Dictionary Data Name Format** Kev Mandatory Position Valid Values/Remarks **Data Code** Field /Optional 39. Court Order Type 49 Char(1) Optional court\_order\_type 7 = Assessment & evaluation 8 = Evaluation & treatment 9 = Treatment0=None 40. Employer Assisted Program Char(3)eap\_code 50-52 **Optional** (EAP) Employer Code 41. Education Level at Admission Char(2) education level Mandatory 53-54 42. Employment Status Char(2) employment\_status 55-56 Mandatory 43. Living Arrangement Char(2) living arrang Mandatory 57-58 44. Admission Referral Source Char(2) adm ref src Mandatory 59-60 45. Veteran Status Char(1) cons\_veteran\_status 61 Mandatory 46. Consumer Status 62 Send 'D' if admission is to be Char(1) consv status Mandatory deleted for record type '31' 63-70 47. Consumer Status Date Char(8) cons status date Mandatory YYYYMMDD 48. Last Served Date Char(8) cons last served date Optional 71-78 YYYYMMDD must be >= Admit Date and <= Discharge Date, if present 49. Accommodation for Special accomm for handi 79-80 Char(2) Mandatory Needs 50. English Proficiency english\_proficiency N=No Y=Yes Char(1) Mandatory 81 51. Primary Language 82 E,L,F,S,O,N Char(1) primary language Mandatory 52. Legally Responsible Person legally resp person 83-84 Char(2) **Optional** 53. Zip Code Char(9) zipcode Mandatory 85-93 54. Family Income Char(8) 94-101 family income Mandatory if Non-Medicaid

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#	Data Name	Format	Data Dictionary	Key	Mandatory	Position	Valid Values/Remarks
			Data Code	Field	/Optional		
55.	Family Size	Char(2)	family_size		Mandatory	102-103	
					if Non-		
					Medicaid		
56.	Arrests In 30 Days Prior To	Char(2)	arrests_30_days		Mandatory	104-105	
	Admission						
57.	Health/Medical Insurance	Char (1)	health_med_ins		Mandatory	106	1-9
58.	Filler	Char (2)			Optional	107-108	Spaces
					_		-

Name Consumer Episode Completion (Discharge) Details NOTE: Record Length has been increased to 70

**Description** This record provides information on discharged consumers.

Frequency Daily
Record Size 40 Bytes

Rules This record is mandatory for all consumers who have completed an episode of care (discharged) during the reporting period.

Send a record

• When a client completes an episode of care (discharged) during the report period. An episode of care is defined by the end of service (60 days uninterrupted time period when there is no billable service for the client IPRS or Medicaid), except for the Adult Mental Health Stable Recovery Population clients who may experience up to a 365 day break in service before a discharge record is required. Substance Abuse client who are identified as appropriate to report to the TEDS (Treatment Episodes Data System) will receive particular scrutiny by being identified in a tracking report and monitored in the Performance Contract.

#	Data Name	Format	Data Dictionary	Key	Mandatory	Position	Valid Values/Remarks
			Data Code	Field	/Optional		
1.	Record Type	Char(2)			Mandatory	1-2	'12': Add
							'32': Update
							'82': Delete
2.	LME	Char(5)	cons_area_pgm_fac + area_pgm_code	Yes	Mandatory	3-7	
3.	Client Number	Char(10)	cons_id_identifier	Yes	Mandatory	8-17	Case Number
4.	Discharge Date	Char(8)	cons_status_date		Mandatory	18-25	YYYYMMDD
							must be >= Admit Date
5.	Discharge Reason	Char(1)	dischv_reason		Mandatory	26	
6.	Discharge Referral To	Char(2)	dischv_ref_src; adm_ref_src		Mandatory	27-28	
7.	Discharge Living Arrangement	Char(2)	living_arrang		Mandatory	29-30	
8.	Discharge Employment Status	Char(2)	employment-status		Mandatory	31-32	
9.	Arrests In The 30 days Prior To	Char(2)	arrests_30_days		Mandatory	33-34	
	Discharge						
10.	Date of Last Service	Char (8)	cons_last_served_date		Mandatory	35-42	YYYYMMDD
							must be >= Admit Date and <= Last
							Discharge Date
11.	Filler	Char(6)			Optional	43-70	Spaces

Name Diagnosis Details (This record is required for selected clients). DMH/DD/SAS requires that these records (13, 33, 83) be sent for

Non-UCR, Private Pay, and TNC

**Description** This record provides diagnostic information about consumers.

Frequency Daily
Record Size 60 Bytes

Rules Send a record

• for each new diagnosis identified during the reporting period for each consumer

• if the end date is updated for a diagnosis i.e. it is determined that a diagnosis is no longer appropriate for a consumer

• for clients for whom an IPRS or Medicaid claim cannot be matched

• for clients for whom there has been a 60 day break in service (except Adult Mental Health Stable Recovery Population) that are still active

#	Data Name	Format	Data Dictionary	Key	Mandatory	Position	Valid Values/Remarks
			Data Code	Field	/Optional		
1.	Record Type	Char(2)			Mandatory	1-2	'13' : Add
							'33' : Update
							'83' : Delete
2.	LME	Char(5)	cons_area_pgm_fac + area_pgm_code	Yes	Mandatory	3-7	
3.	Client Number	Char(10)	cons_id_identifier	Yes	Mandatory	8-17	Case Number
4.	Diagnosis Effective Date	Char(8)	diag_start_date	Yes	Mandatory	18-25	YYYYMMDD
5.	Diagnosis Order	Char(1)	diagv_class	Yes	Mandatory	26	Order of Importance
							1-9, A-Z
							1 = P (Principle)
							2-6 = R (Primary)
							7 or greater = A (Additional)
6.	Diagnosis Code	Char(10)	diagv_code_num	Yes	Mandatory	27-36	Numbers only; do not send decimals
7.	Diagnosis Axis Code	Char(1)	diagv_axis_code	Yes	Optional	37	
8.	Pregnancy Status	Char(1)	Stored as		Mandatory	38	Y = Yes
			special population = 'P'		if Gender =		N = No
			specv_type		'F'		
9.	Diagnosis End Date	Char(8)	diag_end_date		Optional	39-46	If sent, in YYYYMMDD format.
							Cannot be future date.
10.	Filler	Char(14)			Optional	47-60	Spaces

Name Disability Details (This record is optional). DMH/DD/SAS no longer requires that these records (14, 34, 84) be sent.

**Description** This record provides disability information about consumers.

Frequency Daily <u>Discontinued</u>

**Record Size** 70 Bytes

Rules

Send a record

• for each new disability identified during the reporting period for each consumer

• for any disability information updated during the reporting period

• if you choose to report, all current processing rules will remain in effect

#	Data Name	Format	Data Dictionary	Key	Mandatory	Position	Valid Values/Remarks
			Data Code	Field	/Optional		
1.	Record Type	Char(2)			Mandatory	1-2	'14' : Add
							'34' : Update
							'84' : Delete
2.	LME	Char(5)	cons_area_pgm_fac + area_pgm_code	Yes	Mandatory	3-7	
3.	Client Number	Char(10)	cons_id_identifier	Yes	Mandatory	8-17	Case Number
4.	Disability Start Date	Char(8)	disa_start_date	Yes	Mandatory	18-25	YYYYMMDD
5.	Disability Class	Char(1)	disav_class	Yes	Mandatory	26	
6.	Disability Code	Char(2)	disav_code	Yes	Mandatory	27-28	
7.	Disability Level of Eligibility	Char(1)	disav_loe		Mandatory	29	If value of '5' then at least one
	(LOE)						assessment scale must be NC-SNAP
							If value of 'H' then at least one
							assessment scale must be ASAM.
8.	Disability Functional Assessment	Char(3)	disa_fa_score		Required	30-32	
	Score 1				for Primary;		
					else		
					Optional		
9.	Disability Functional Assessment	Char(8)	disa_fa_date		Required	33-40	YYYYMMDD
	Date 1				for Primary;		
					else		
					Optional		

**Data Name** Format **Data Dictionary** Mandatory Position Valid Values/Remarks Key **Data Code** Field /Optional 10. Disability Functional Assessment Char(1) disav\_fa\_scale Required 41 Scale 1 for Primary; else Optional 11. Disability Functional Assessment Char(3) disa\_fa\_score Optional 42-44 Score 2 12. Disability Functional Assessment YYYYMMDD Char(8) disa\_fa\_date Optional 45-52 Date 2 13. Disability Functional Assessment Char(1) disav\_fa\_scale Optional 53 Scale 2 14. Disability End Date Char(8) disa end date Optional 54-61 If sent, in YYYYMMDD format. Future dates permitted for compliance with IPRS. 15. Filler Char(10) 61-70 Optional Spaces

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Name Special Population Details (This record is optional). DMH/DD/SAS no longer requires that these records (15,35,85) be sent.

**Description** One record is provided for each special population to which a consumer belongs. Any number of special population records can be sent for a

consumer.

Frequency Daily <u>Discontinued</u>

**Record Size** 40 Bytes

Rules

Send a record

• this record is required only if a consumer belongs to a special population as defined in the Data Dictionary, it is not required for every consumer

• for each special population identified for a consumer during the reporting period

when an existing special population is no longer valid for a consumer

• if you choose to report, all current processing rules will remain in effect

\*Note: For female clients with principle or primary diagnosis of substance abuse, and pregnancy status of 'Y', this record will automatically be generated by our system, however sending a '15' will not result in an error.

#	Data Name	Format	Data Dictionary	Key	Mandatory	Position	Valid Values/Remarks
			Data Code	Field	/Optional		
1.	Record Type	Char(2)			Mandatory	1-2	'15' : Add
							'35' : Update
							'85' : Delete
2.	LME	Char(5)	cons_area_pgm_fac + area_pgm_code	Yes	Mandatory	3-7	
3.	Client Number	Char(10)	cons_id_identifier	Yes	Mandatory	8-17	Case Number
4.	Special Population Type	Char(1)	specv_type	Yes	Mandatory	18	
5.	Special Population Start Date	Char(8)	spec_start_date	Yes	Mandatory	19-26	YYYYMMDD
6.	Special Population End Date	Char(8)	spec_end_date		Optional	27-34	If sent, in YYYYMMDD format
							Cannot be future date.
7.	Filler	Char(6)			Optional	35-40	Spaces

Name Risk Factor Details(This record is optional). DMH/DD/SAS no longer requires that these records (16, 36, 86) be sent.

**Description** Up to 12 risk factors can be identified for a child. These are used for the Governor's At Risk Report.

Frequency Daily <u>Discontinued</u>

**Record Size** 50 Bytes

Rules

Send one record

- this record is required only if a consumer is in one of these Risk groups as defined in the Data Dictionary, it is not required for every consumer
- when the risk factors are collected or updated for a consumer during the reporting period
- if record is provided, at least one Risk Factor is expected
- update record replaces all existing risk factors

#	Data Name	Format	Data Dictionary Data Code	Key Field	Mandatory /Optional	Position	Valid Values/Remarks
1.	Record Type	Char(2)	Butti Couc	Tield	Mandatory	1-2	'16' : Add '36' : Update '86' : Delete
2.	LME	Char(5)	cons_area_pgm_fac + area_pgm_code	Yes	Mandatory	2-7	30 . Detect
3.	Client Number	Char(10)	cons_id_identifier	Yes	Mandatory	8-17	Case Number
4.	Risk Factor 1	Char(2)	riskv_factor		Mandatory	18-19	
5.	Risk Factor 2	Char(2)	riskv_factor		Optional	20-21	
6.	Risk Factor 3	Char(2)	riskv_factor		Optional	22-23	
7.	Risk Factor 4	Char(2)	riskv_factor		Optional	24-25	
8.	Risk Factor 5	Char(2)	riskv_factor		Optional	26-27	
9.	Risk Factor 6	Char(2)	riskv_factor		Optional	28-29	
10.	Risk Factor 7	Char(2)	riskv_factor		Optional	30-31	
11.	Risk Factor 8	Char(2)	riskv_factor		Optional	32-33	
12.	Risk Factor 9	Char(2)	riskv_factor		Optional	34-35	
13.	Risk Factor 10	Char(2)	riskv_factor		Optional	36-37	
14.	Risk Factor 11	Char(2)	riskv_factor		Optional	38-39	
15.	Risk Factor 12	Char(2)	riskv_factor		Optional	40-41	
16.	Filler	Char(9)			Optional	42-50	Spaces

Name Substance Abuse (Drug of Choice) Details

**Description** This record provides substance abuse information for all consumers who receive a substance abuse service (SA Target Pop Group or SA

Principal Diagnosis). It is required within 60 days of beginning date of service for clients enrolled in a SA Target Pop Group or SA Principal

Diagnosis and it also required when a substance abuse client is discharged.

**Frequency** Daily **Record Size** 50 Bytes

Rules Send a record

• for any new consumer who receives a substance abuse service (SA Target Pop Group or SA Principal Diagnosis)

• for any new drug of choice identified during the reporting period for each consumer

• when the existing substance abuse information is updated

• when a record type 12 (Discharge Details) or a record type 18 (Substance Abuse Treatment Details) is sent for an SA client

	Data Name	Format	Data Dictionary	Key	Mandatory	Position	Valid Values/Remarks
#			Data Code	Field	/Optional		
1.	Record Type	Char(2)			Mandatory	1-2	'17' : Add
							'37' : Update
							'87' : Delete
2.	LME	Char(5)	cons_area_pgm_fac + area_pgm_code	Yes	Mandatory	3-7	
3.	Client Number	Char(10)	cons_id_identifier	Yes	Mandatory	8-17	Case Number
4.	Substance Abuse Start Date	Char(8)	sa_start_date	Yes	Mandatory	18-25	YYYYMMDD
5.	Substance Abuse Drug Code	Char(2)	sav_drug_code	Yes	Mandatory	26-27	
6.	Substance Abuse Drug Age at	Char(2)	sav_age_first_use		Mandatory	28-29	
	First Use						
7.	Substance Abuse Drug Use	Char(1)	sav_drug_frequency		Mandatory	30	
	Frequency						
8.	Substance Abuse Drug Use	Char(1)	sav_drug_use_route		Mandatory	31	
	Route						
9.	Substance Abuse Drug Use Class	Char(1)	sav_drug_use_class	Yes	Mandatory	32	
10.	Substance Abuse End Date	Char(8)	sa_end_date		Optional	33-40	YYYYMMDD.
							Cannot be future date.
11.	Substance Abuse Transaction	Char(1)	sav_drug_trans_type		Mandatory	41	A, T, D
	Type						
12.	Filler	Char(10)			Optional	42-50	Spaces

Name Substance Abuse Treatment (Movement) Details

**Description** This record provides substance abuse information for consumers who continue to receive a substance abuse service.

Frequency Daily

Record Size 50 Bytes

Rules

Send a record

• If an SA client has been identified as having no billable service in 60 days, but the LME has determined that the client should not be discharged, submission of a Substance Abuse Treatment (Movement) Details record (type 18) will identify that the client is still actively receiving services. Note: In addition to the substance Abuse Treatment (Movement) Details record, a Diagnosis Details (13) and a Substance Abuse (Drug of Choice) Details Record (17) must be sent.

#	Data Name	Format	Data Dictionary	Key	Mandatory	Position	Valid Values/Remarks
			Data Code	Field	/Optional		
1.	Record Type	Char(2)			Mandatory	1-2	'18' : Add
							'38' : Update
							'88' : Delete
2.	LME	Char(5)	cons_area_pgm_fac + area_pgm_code	Yes	Mandatory	3-7	
3.	Client Number	Char(10)	cons_id_identifier	Yes	Mandatory	8-17	Case Number
4.	SA Treatment (Movement) Start	Char(8)	samo_start_date	Yes	Mandatory	18-25	YYYYMMDD
	Date						
5.	Federal Service Type	Char(2)	federal_service_type	Yes	Mandatory	26-27	
6.	Methadone Planned Indicator	Char(1)	samo_meth_plan_ind		Mandatory	28	
7.	UFDS/ <mark>ISATS</mark> Code	Char(8)	ufds_code		Mandatory	29-36	
8.	SA Treatment (Movement) End	Char(8)	samo_end_date		Optional	37-44	YYYYMMDD
	(Release) Date						Cannot be future date.
9.	Filler	Char(6)			Optional	45-50	Spaces

#### Reading the Data Dictionary

Following is a key to reading and understanding the attached data dictionary. Please note that the dictionary is written to facilitate the technical aspects of the data; therefore, there might be some parts of it that are not clear or not consistent with the LME Reporting Requirements Please use the Reporting Requirements as your correct source of information; this dictionary is for reference only.

Table Code: Table data element resides on

Name: Long data element name

Code: Data dictionary's code for data element; referenced in above tables. Dictionary is

alphabetized by this code.

Label: Indicates if data element is MANDATORY, OPTIONAL, or DERIVED, on the particular

table in the data dictionary. Do not use this to determine LME submission

requirements; use the instructions in the reporting requirements above. Ignore those data elements that are labeled 'INSTITUTION ONLY' or 'DERIVED'; these

do not apply to LME's.

Domain: N/A

Type: indicates type and length of field:

Char = alphanumeric field
Datetime = date and time field
Integer = number with no decimals

Description: Definition/description of the data element including valid values and edits. This is the

area in which to find detailed descriptions and valid values for reporting.

Annotation:

Data migration - processes, notes, etc. for converting data element from current Client

Information System.

Post migration - processes, notes, etc. pertaining to the regular processing or loading of

data into the CDW; used to write load programs.

# **Operational Instructions**

#### Deadlines and Schedules

# User Acceptance Test Files

- Test system is refreshed with Production data each morning.
- Test files can be sent daily, but the same file can only be sent once per day.
- Test files will be processed as part of a nightly batch cycle after normal business hours.
- Test error files will be available for download the next day (after processing).
- Test error files will be deleted after no more than five business days due to space considerations.

#### Production Files

- Production files can be sent daily, with a limit of one file per day, M-F.
- All data files must be dated greater than ANY previous data file which has been processed.
- Production files will be processed as part of a nightly batch cycle after normal business hours.
- Production error files will be available for download the next day (after processing).
- Production error files will be deleted after no more than five business days due to space considerations.

# **Processing Limitations**

The only limits for sending data to be processed are those set forth by the LME Performance Agreement (stipulates that data files are due by the 15<sup>th</sup> of the month), unless otherwise noted above. There is no longer a monthly batch process by which data needs to be received, in order to be processed. All data is processed nightly by automated batch systems.

# System Access and FTP

Userid's and Passwords

#### Userid's

- Each LME will have it's own userid's and password's. This will connect you to your own subdirectory on the UNIX machine at SIPS.
- For Production, The UNIX userid will be apnnn where nnn= LME number. For example, the UNIX userid for Smoky Mountain will be ap101.
- For Test, The UNIX userid will be apnnnt where nnn= LME number and the constant, t represents "test". For example, the UNIX userid for Smoky Mountain will be ap101t.

Please note that in the UNIX world, there is a difference between upper case and lower case. All userids and passwords will be all lower case. If upper case is entered, you will get an error.

Listed below are all LME. Please let us know immediately if any of these are incorrect.

- 101 Smoky Mountain/New River
- Foothills 105
- 108 Pathways
- 109 Catawba/Burke County
- 110 Mecklenburg
- 112 Piedmont
- Western Highlands 113
- 201 Crossroads
- CenterPointe 202
- 204 Guilford
- 205 Alamance-Caswell/Rockingham
- 206 O-P-C (Orange, Person, Chatham)
- 207 Durham
- 208 Five County Mental Health Authority
- 303 Sandhills Center
- 304 Southeastern Regional
- 305 Cumberland
- 307 Johnston
- 308 Wake
- 401 Southeastern Center
- 402 Onslow/Carteret
- 404 Beacon Center
- 405 Beacon Center
- 407 East Carolina Behavioral Health
- Tideland/Albemarle 412

#### Passwords

Please contact Data Operations for password information and follow the TELNET instructions below to change your password as quickly as possible.

Again, please note that in the UNIX world, there is a difference between upper case and lower case. All userids and passwords will be all lower case. If upper case is entered, you will get an error.

In the future, to change your password (or for System/Communication problems) please contact:

ITS Help Desk @ 919-872-8841 or 1-800-722-3946 and ask for UNIX Support.

To change a password, the following information must be provided:

- LME number and name
- Your name and phone number
- Current password

In addition you must use **TELNET** to maintain and change passwords. If a new password is granted, it is just temporary and must be changed upon first use. Go to **TELNET** where upon entering the temporary password, you will be prompted to enter a new one. This ensures security, so that not even ITS will know your password.

Host Name, Files, and Subdirectories

Host

The host name for the UNIX box is:

scc01b.its.state.nc.us – for Test data scc03b.its.state.nc.us – for Production data

This is the name to use when FTPing.

Note: SIMPC will not work for this system.

#### Files and Subdirectories

Each LME will have access to its own subdirectory only. You will be allowed to create files on this subdirectory; **modification of existing (previously sent) files will not be allowed.** If you send an erroneous file and you want it deleted **BEFORE** it is loaded to the CDW, you have the authority to remove the file from our system.

The files FTP'ed to the division must be in binary format . The following names must be used:

```
apnnn_ccyymmdd.dat.gpg ( Encrypted Area Program Data File)
```

```
where
apnnn = UNIX userid i.e. LME number
ccyy = 4 character year.
mm = month
dd = day
```

apnnn\_ccyymmdd.err.gpg ( Encrypted Area Program Error Report)

```
where apnnn = UNIX userid ccyy = 4 character year. mm = month dd = day
```

apnnn\_ccyymmdd.err.dat.gpg ( Encrypted Area Program Error Data File)

```
where

apnnn = UNIX userid

ccyy = 4 character year.

mm = month

dd = day
```

#### **Error Files Returned to LME**

Each record in the error file will contain the error transaction, in the same format as sent, followed by the error message. There will be total number of transactions record at the end.

In addition to the above error files, a Batch Control file containing statistics for each LME will be provided under the following format and naming convention:

# apnnn\_ccyymmdd.ctl.gpg ( Encrypted Area Program Batch Control Statistics)

```
where

apnnn = UNIX userid

ccyy = 4 character year.

mm = month

dd = day
```